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APPLICANTS

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** CONTINUING DATA *****

This application is a CON of 08/463,028 06/05/1995 PAT 6,610,476
 which is a DIV of 06/693,866 01/23/1985
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 which is a CIP of 06/643,306 08/22/1984 ABN

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY TX	SHEETS DRAWING 23	TOTAL CLAIMS 48	INDEPENDENT CLAIMS 23
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature _____ Initials _____				

ADDRESS
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TITLE
 Detection of HIV-1 DNA

FILING FEE RECEIVED 3064	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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